

BEST AVAILABLE COPY

ISSUE SLIP TABLE / AREA (for additional cross references)

POSITION	INITIALS	LD NO.	DATE
FEE DETERMINATION	VB		02-25-01
O.I.P.E. CLASSIFIER		49	3/8/01
FORMALITY REVIEW	fa	720	05-29-01
RESPONSE FORMALITY REVIEW	TL	947	09/17/01

INDEX OF CLAIMS

✓ Rejected N Non-directed
 - Absent I Interference
 (Through numerals) Canceled A Appeal
 + Restricted O Objected

Claim	Date	Claim	Date	Claim	Date
1	02/25/01	1	02/25/01	1	02/25/01
2	02/25/01	2	02/25/01	2	02/25/01
3	02/25/01	3	02/25/01	3	02/25/01
4	02/25/01	4	02/25/01	4	02/25/01
5	02/25/01	5	02/25/01	5	02/25/01
6	02/25/01	6	02/25/01	6	02/25/01
7	02/25/01	7	02/25/01	7	02/25/01
8	02/25/01	8	02/25/01	8	02/25/01
9	02/25/01	9	02/25/01	9	02/25/01
10	02/25/01	10	02/25/01	10	02/25/01
11	02/25/01	11	02/25/01	11	02/25/01
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99	02/25/01	99	02/25/01	99	02/25/01
100	02/25/01	100	02/25/01	100	02/25/01

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

3/2/01
 4/1/01
 4/1/01